Establishment Name Address City, State, Zip Phone Number

GUARANTEE IN PART CONTRACT

Preneed Statement of Funeral Goods and Services Selected

Name	of Beneficiary:	D.O.B	SS#
Name	of Buyer:	Address:	SS#
	GUARANTEED G	OODS, SERVICES &	c CASH ADVANCE ITEMS
		Total Guaranteed Fund	eral Price\$
		· · · · · · · · · · · · · · · · · · ·	
NO)N-GUARANTEED	GOODS, SERVICES	S & CASH ADVANCE ITEMS
	Tot	al Non-Guaranteed Fund	eral Price\$
	Total Guaranteed a	nd Non-Guaranteed Fund	eral Price\$
FTC I	DISCLOSURES		
1.	Legal Requirements Charges are only for those items that you selected or that you selected or that are required. If we are required by law or by a cemetery or crematory to use any items, we will explain the reasons in writing below.		
2.	Embalming If you selected a funeral that may require embalming, such as a funeral with viewing, you may have to pay for embalming. You do not have to pay for embalming you did not approve if you selected arrangements such as a direct cremation or immediate burial. If we charged for embalming, we will explain why below.		
3.			
DISC	LOSURES REQUIRED E	V STATITE	
1/1/50	_	rired to be paid at the time of need ar	e listed.
			iled by any consumer who believes they have suffered a he MD code on or after January 1, 2010.
			handise and cash advance indicated on this statement.
Signat	ture of Buyer:		Date:
Signature of Licensee:			Date: